Summary of Change	Item due	Due date	Who needs a copy?
Level of Care form (LT-MR-104/LT-ABI-105)	Completed LT-MR-104 or LT-ABI-105 Form shall list the probable or possible	September 30, 2009 for people on wait list	DDD Waiver Specialist
Level of Care must be determined before the psychological evaluation and ICAP assessment are completed due to changes in the waiver renewal.	diagnosis of the applicant based upon past medical information or assessments.	October 30, 2009 for people in the eligibility process On-going after October 1, 2009 the form is due to DDD as applicants choose a Case Manager	(DFS does <u>not</u> need a copy of the form at this time.)
Provider (and Case Manager) Medication Assistance Policy and Procedures. Providers shall develop their own policy and procedures that align with the Division's Medication Assistance Standards and Policy, posted on our website, <u>OR</u> they can sign the policy and procedures draft as developed by the Division.	Provider Medication Assistance Policies and Procedures A provider policy and procedures document is available on the Division's website or from your local Survey Certification Specialist.	September 30, 2009 Extended to October 30, 2009 Notify your local Survey Certification Specialist if you have questions.	Keep the policy in your provider file and notify your participants, guardians, and outside providers as you would with other policy changes you make.
Medication Assistance Training Division standards require all providers who assist with medications to receive the Medication Assistance Training.	Medication Assistance Training Trainings are scheduled across the state, check the schedule on our website.	December 31, 2009	Certificate issued by DDD and may be requested as proof of training by case managers, participants, or guardians.
Medication Consent Form Due to changes in the waiver renewal, all providers who assist participants with medications shall have a signed consent form in their participant file.	Medication Consent Form Form is available on our website. Case Managers shall obtain the needed consent from the participant or guardian and distribute form to team members.	September 30, 2009 Contact a Survey Certification Specialist if you have questions.	All providers listed on the participant's form
Medication Assistance and Conflict of Interest Disclosure Form For participants, who have a plan on the old IPC forms, this supplemental form shall be completed to gather the information in these areas to assist providers in meeting related requirements.	Medication Assistance and Conflict of Interest Disclosure Form Form is available on our website. Form is due for all participants whose next plan of care start date is February 1, 2010 to June 30, 2010.	December 1, 2009	All of a participant's team members who receive copies of the plan of care. DDD does not need a copy, but may check provider files on site visits.
Medication Assistance Record (MAR) Providers shall implement an MAR form for each participant receiving medication assistance by September 30, 2009. A revised MAR form and instructions are on our website.	Medication Assistance Record Form is available on our website and DDD has decided it can be recreated by a provider as long as all of the components in our version are included.	September 30, 2009 Notify your local Survey Certification Specialist if you have questions.	Providers shall have an MAR. Copies do not have to go to case managers. Case managers need to know about any medication incidents, behaviors, trends, errors, or health change of the participant.

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PRN Usage Form Providers shall follow the PRN protocol listed in the participant's plan of care and track PRN usage. The case manager shall receive PRN usage reports from the provider each month with other billing documentation.	PRN Usage Form Form available on the Division's website as the 2 nd page of the MAR document. It can be made into a separate form and/or It can be recreated by a provider as long as all components are included.	September 30, 2009 Contact a Survey Certification Specialist if you have questions.	Providers shall have a PRN usage form if they assist with PRNs as part of a participant's plan of care Case Managers shall receive copies of PRN usage reports, incident reports, and related documentation on a participant's condition.		
Medication Error Reporting Medication errors are reportable to the Division via the critical incident reporting web portal, see Medication Assistance Standards and Policy for medication error information.	DDD Critical Incident Report Note: Missed medications shall be reported in the category of a "wrong dose".	July 1, 2009	DDD, Case manager DFS and P&A do not need to be notified of med errors unless abuse, neglect, or a crime is suspected.		
Case Management Quarterly Form Form is now standardized and on the Division's website. Tracks information on the number and type of restraints and restrictions a participant has each month. Data needed as part of DDD's Quality Management Strategy.	Case Management Quarterly Form – First page only	After July 1, 2009, 1 st page is due to DDD as the quarterly form is completed—ONLY for participants who have restraints or restrictions in his/her positive behavior support plan.	DDD Survey Certification Manager		
Case Manager Participant List submitted for all participants who have a positive behavior support (PBS) plan. All case managers were sent a letter requesting a list of participants with a PBS plan, restraints and restrictions.	Case Manager Participant List The table to complete was sent as an attachment to the e-mail notice.	July 15, 2009	DDD Survey Certification Manager		
Case Manager NPI Number There has been a change in requiring all case managers to obtain a NPI number for case management services. The NPI requirement is for all case managers, who are employed with an organization as well as case managers that have an EIN number. The Division will assist organizations that provide case management services and for case managers who use an EIN number with obtaining a new NPI for case management services. This assistance will be provided at regional trainings and you will be contacted when a training will be provided in your area. For those case managers, who are certified under their social security number and use a NPI for all services they provide, the Division will be in contact with you regarding any changes that may be required for billing.					
Modifications to plans if a waiver service is ending September 30, 2009 Prevocational, In Home Support, and Intermittent Residential Habilitation services will end September 30 th .	Modification to the plan of care A participant must have changed services to other available waiver services by September 30 th .	Modifications were due September 1, 2009. These services ended Oct 1, 2009.	DDD Waiver Specialist		
ICAP Summaries Only the 3-page ICAP Summary will be sent to case managers. The booklets will only be sent by request.	Nothing due	October 1, 2009	Case Managers will get a copy of the ICAP summary only.		
TCM (T2023) Billing	No Diagnostic Code needs listed	Starting Oct 1, 2009	Claim does not need diagnostic code		